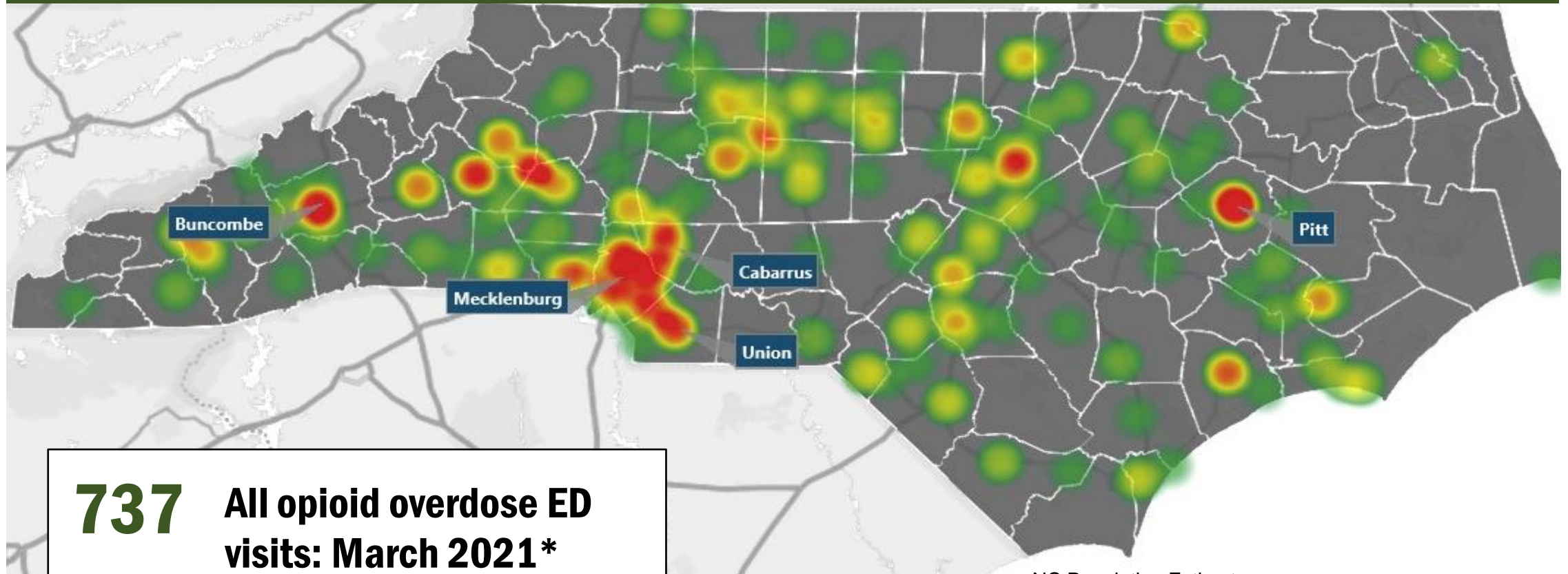


# ALL OPIOID OVERDOSE ED VISITS: NORTH CAROLINA, MARCH 2021\*

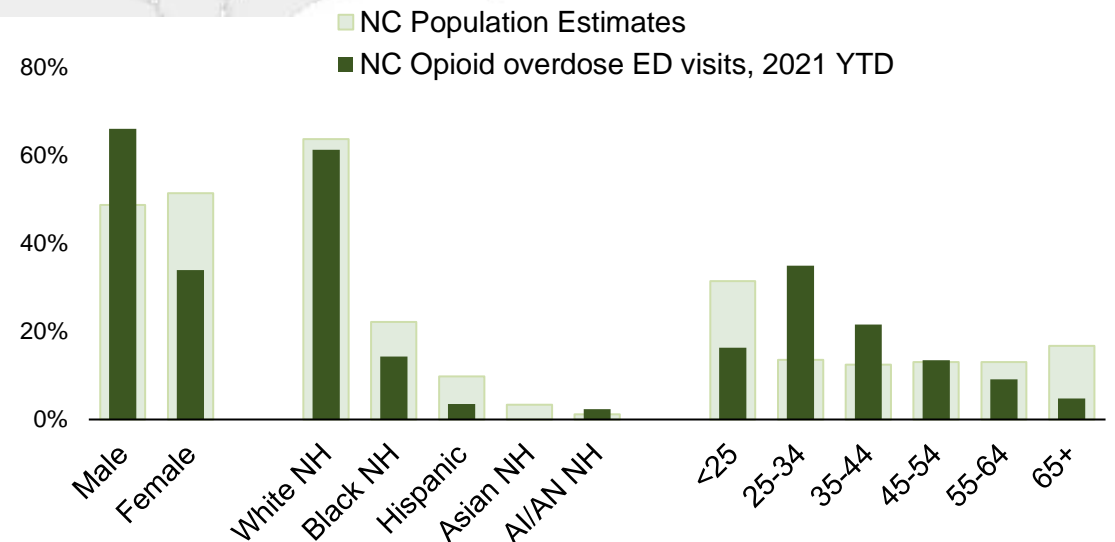


**737** All opioid overdose ED visits: March 2021\*  
 Compared to **657** March 2020

Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM)

The highest rates of visits ( $\geq 10$ ) per 100,000 residents occurred in:

**Burke (21), Carteret (15.8), Craven (15.5), Caldwell (14.6), and Catawba (13.9) counties.**

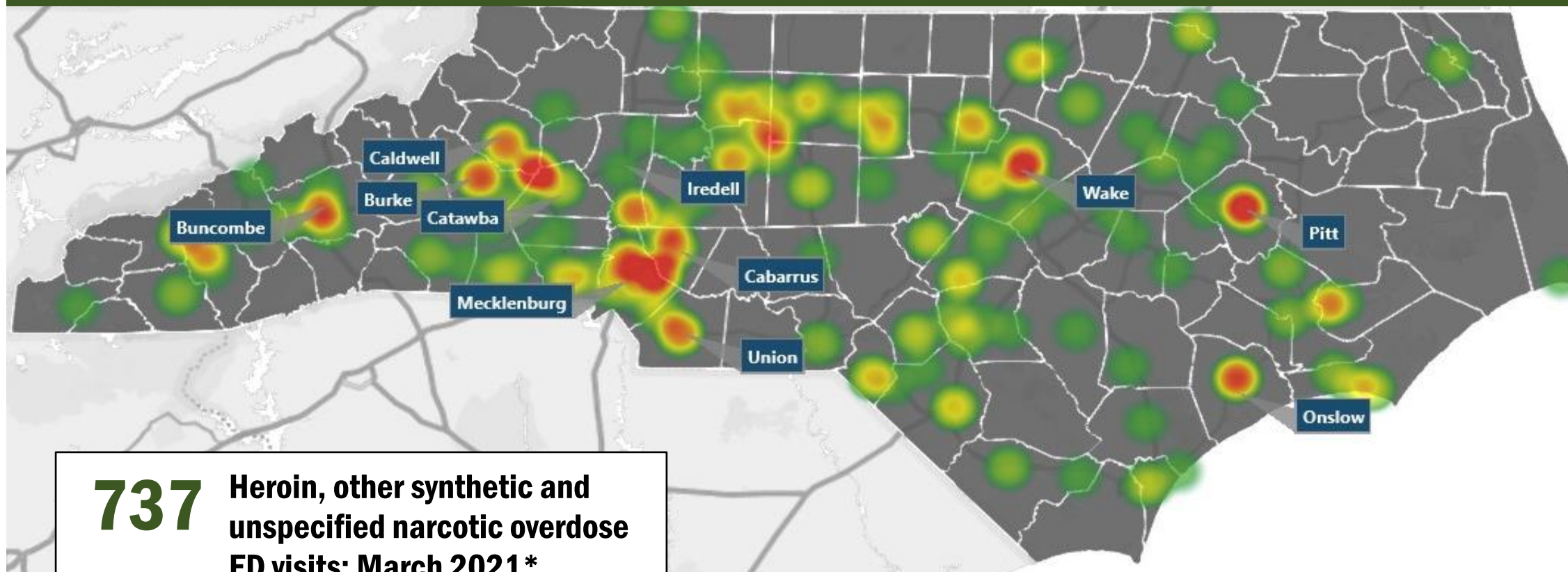


**Note:** NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents.\*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.



North Carolina  
 Injury & Violence  
 PREVENTION Branch

# HEROIN AND OTHER SYNTHETIC/ UNSPECIFIED NARCOTIC OVERDOSE ED VISITS, MARCH 2021\*



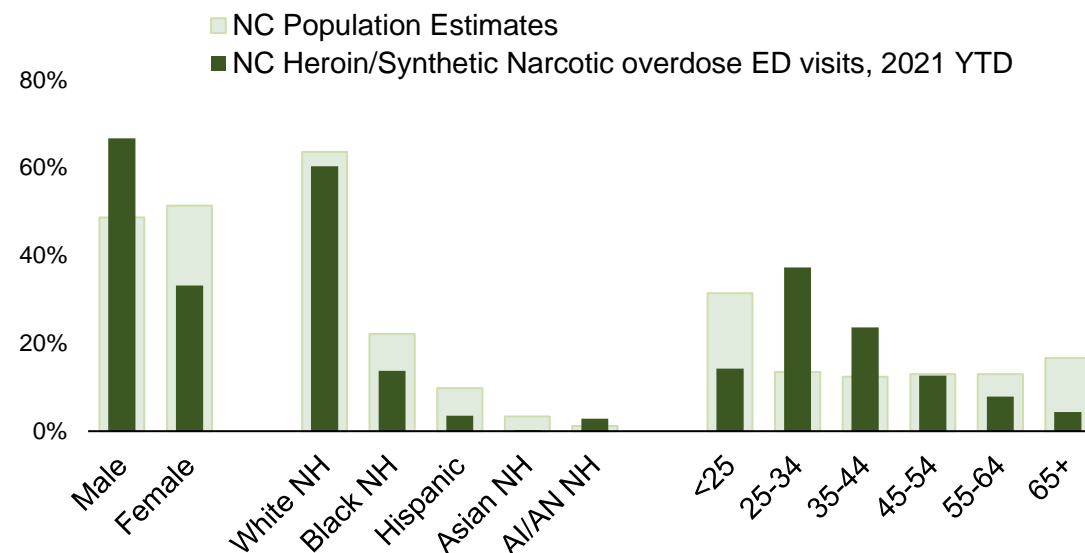
**737** Heroin, other synthetic and unspecified narcotic overdose ED visits: March 2021\*

Compared to **526** March 2020

Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM) searching diagnosis codes for T40.1, T40.4, & T40.6.

The highest rates of visits ( $\geq 10$ ) per 100,000 residents occurred in:

**Burke (16.6), Carteret (15.8), Caldwell (12.2), Craven (11.7), and Catawba (11.3) counties.**



**Note:** NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of a heroin or other synthetic narcotic overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. \*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.